

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN THE DIVISIONAL PATENT APPLICATION OF:

DANNY D. BEAVER

U.S. SERIAL NO: 10/779,755

GROUP: 3726

FILED: FEBRUARY 17, 2004

EXAMINER: MARC QUEMUEL

JIMENEZ

FOR: FORMING SERPENTINE HEAT EXCHANGERS

FROM SPINE FIN TUBING

La Crosse, Wisconsin February 13, 2007 I hereby certify that this correspondence is being deposited with the U.S. Postal Service as First Class Mail in an envelope addressed to: Mail Stop Petition, Commissioner for Patents, P.O. Box 1450,

Alexandria, VA 22213-1450 on

William O'Driscoll

REQUEST FOR THREE MONTH EXTENSION OF TERM FOR RESPONSE

Mail Stop Petition

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

This is a request for a three month extension of time effectively extending the term for response from November 8, 2007 to February 8, 2007. Please charge Deposit Account 20-1434 any fees for this extension. A duplicate copy of this form is attached for that

purpose.

Dear Sir:

Respectfully Submitted,

02/22/2007 LWONDIM1 00000013 201434 10779755

02 FC:1253

1020.00 DA

William O'Driscoll

Registration No. 33,294

Telephone Number: (608)787-2538

937:1372097 - BRHLLK 1 - 93000913 - **8**01434 13:37-30 - 38

20779755

UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND							
1 Date of Request: 06/28/07 2 Seri			al/Pat	tent	#1	0/779,755	
3 Please refund the following fee(s):			4 PAP NUM	ER BER	5 DATE FILED	6 AMOUNT	
	Filing					\$	
	Amendment					\$	
Х	Extension of Time 1253				02/21/07	\$ 1,020.00	
	Notice of Appeal/Appeal					\$	
	Petition					\$	
	Issue					\$	
	Cert of Correction/Terminal Disc.					\$	
	Maintenance					\$	
:	Assignment					\$	
	Other					\$	
		7 TOTAL AMOUNT OF REFUND			\$1,020.00		
		8 TO BE REFUNDED BY:					
10 REASON:			Treasury Check				
	Overpayment			X Credit Deposit A/C #:			
	Duplicate Payment		9 2 0 1 4 3 4				
Х	No Fee Due (Explanation):						
The extension of time period is over; not extension fee is due.							
·							
11 REFUND REQUESTED BY:							
TYPED/PRINTED NAME: Irvin Dingle				T	TITLE:	Paralegal	
SIGNATURE: July				P	HONE:	2-3210	
OFFICE: Petitions							
THIS SPACE RESERVED FOR FINANCE USE ONLY: APPROVED: DATE:							

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

Office of Finance Refund Branch Crystal Park One, Room 802B

FORM PTO 1577 (01/90)